

1653/8/

Patent Attorney's Docket No. <u>033352-007</u>

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re P	atent Application of)				
Turley et al. Application No.: 09/685,010) Group Art Unit: 1653				
Applica	ation No.: 09/685,010) Examiner: S.W. Liu				
Filed: October 5, 2000		Confirmation No.: 5697				
For:	COMPOSITIONS AND METHODS FOR TREATING CELLULAR RESPONSE TO INJURY AND OTHER PROLIFERATING CELL DISORDERS REGULATED BY HYALADHERIN AND HYALURONANS))))				
	AMENDMENT/REPLY T	RECEIVED				
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 SEP 0 9 26 TECH CENTER 16						
Sir:		•				
Er	sclosed is a reply for the above-identified pa	tent application.				
[X] A Petition for Extension of Time is also enclosed.						
ι	[] A Terminal Disclaimer and the [] \$55.00 (2814) [] \$110.00 (1814) fee due-under 37 C.F.R. § 1.20(d) are also enclosed.					
[X	C.F.R. § 1.20(d) are also enclosed.					
[X] Small entity status is hereby claimed.						
[] Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the [] \$375.00 (2801) [] \$750.00 (1801) fee due under 37 C.F.R. § 1.17(e).						
	[] Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.					
	[] Applicant(s) previously submitted _ requested.	, on, for which continued examination is				

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- [] Applicant(s) requests suspension of action by the Office until at least ___, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.
- [X] No additional claim fee is required.
- [] An additional claim fee is required, and is calculated as shown below:

	No. OF CLAIMS	Highest No. Of Claims Previously Paid for	EXTRA CLAIMS	RATE	ADD'L FEE	
Total Claims	2	MINUS 38 =	0	× \$18.00 (1202) =	0.00	
Independent Claims	1	MINUS 16 =	0	× \$84.00 (1201) =	0.00	
If Amendment adds multiple dependent claims, add \$280.00 (1203)						
Total Claim Amendment Fee						
If small entity status is claimed, subtract 50% of Total Claim Amendment Fee						
TOTAL ADDITIONA	L CLAIM I	EE DUE FOR TH	IS AMENDN	ÆNT	\$0.00	

[X] A total fee in the amount of \$ 465.00 is enclosed (fee for Petition for Extension of Time).

[] Charge \$_____ to Deposit Account No. 02-4800.

TECH CELTER 1630/2900

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

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Date: September 2, 2003

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